



**Clean Version of Amended Claims**  
*(Amendment submitted August 21, 2003)*

19. (Amended) A method of health care benefit billing, payment and reporting in a health care plan that is self-funded by a sponsor comprising the steps of:
  - a) multiple providers providing services to multiple patients covered by a health benefit plan self-funded by a sponsor and reporting the services to a first entity;
  - b) said entity reporting to sponsor on a periodic basis the aggregate amount owed by sponsor for health care services rendered by said providers for the covered patients during the period;
  - c) said entity reporting to patient on a periodic basis the amount owed by patient for provider services rendered during a predetermined period;
  - d) said entity collecting payment from the sponsor;
  - e) said entity paying said provider for services within a predetermined time period after the provisions of services, regardless of whether the entity has received payment from the patient;
  - f) said entity collecting payment from the patient.
20. (Unchanged) A method according to claim 19, further comprising the step of:
  - g) said entity collecting a lump sum from said sponsor for the billed aggregate amount owed for the period.
21. (Amended) A method of health care benefit billing, payment and reporting in a health care plan that is self-funded by a sponsor, comprising the steps of:

- a) plan sponsor providing a self-funded health benefit plan to an employee and to the family members of the employee;
- b) multiple providers providing services to multiple patients covered by a sponsored health benefit plan and reporting the services to a first entity;
- c) said entity reporting to sponsor on a periodic basis the aggregate amount owed by sponsor for health care services rendered by said providers for the covered patients during the period;
- d) said entity reporting to employees on a periodic basis the amount owed by employee for provider services rendered during a predetermined period on behalf of the employee and the employee's covered family members, said report to employee being sorted by family member;
- e) said entity collecting payment from the sponsor;
- f) said entity paying said provider for services within a predetermined time period after the provisions of services, regardless of whether the entity has received payment from the patient;
- g) said entity collecting payment from the patient.

22. (Unchanged) A method according to claim 21, wherein said report to employee includes plain language descriptions of services rendered.

23. (Amended) A system for administering a health benefit plan self-funded by a sponsor comprising:

- a) an administrator;

- b) means for health care providers to report periodically to the administrator all of the services rendered under the health benefit plan for all covered patients during a given time period;
- c) means for the administrator to adjudicate each claim and to determine the amount owed on the claim by the patient and by the plan sponsor;
- d) means for the administrator to report to the patient on a periodic basis all of the services rendered for that patient during a given time period;
- e) means for the administrator to report to the plan sponsor on a periodic basis all of the health care services rendered by providers for all covered patients during a given time period and to identify the amount owed by the plan sponsor for these claims;
- f) means for the sponsor to pay the administrator;
- g) means for the patient to pay the administrator; and
- h) whereby said system operates without the health care providers sending bills, statements or explanation of benefits to the patients and without the sponsor sending bills, statements or explanation of benefits to the patient.